

Suicide and survival

After Daniel: a suicide survivor's tale Moira Farr Harper Flamingo Canada; 1999 224 pp. \$25 ISBN 0-00-255725-8



"S uicide kills everyone," author Moira Farr writes in *After Daniel*: A Suicide Survivor's Tale, drawing on the reflections of English essayist G.K. Chesterton. This is a realization that all physicians must come to terms with as they care for those in melancholy and those in mourning. In a recent survey conducted through the Canadian Psychiatric Association's Practice Research Network, 27% of responding psychiatrists had lost a patient to suicide in the last year. In several instances, these psychiatrists reported profound changes in their professional lives that had resulted from the suicide. An award-winning journalist, Farr writes about her recognition of suicide and survival following the loss of her partner, Daniel Jones. Farr explains that the impetus for writing this book was not simply her lover's death, but "a combination of events and circumstances in the wake of Daniel's suicide that made me feel I was somehow called upon — in the right or wrong place at the right or wrong time, I think — to begin seeing the world in a different light. I know I could never go back to the old way of seeing, or not seeing." Farr's journey of understanding uncloaks the impact of suicide on survivors and publicly unmasks the pain and suffering of those left behind.

The book follows the author's grief from Valentine's Day 1994, when Daniel took his life, to the point of her durable recovery from the trauma four years later. The chapter entitled "A Closed Door" recounts the raw, disorienting discovery of Daniel's handwritten note on the locked living room door: "Do not come in. Please call the police." Farr's recollection is chestgrippingly painful. She reflects that

perhaps it was "that cruel quality of Daniel's" that she recognized as she stood at the closed door, "a quality that might have made him fashion some horrible tableau for the living to find. 'An act like this is prepared within the silence of the heart, as is a great work of art,' writes Camus of suicide in The Myth of Sisyphus. And what artful death, I could hardly have dared ask myself, had Daniel silently prepared?" This chilling account will remind physicians that the suicide survivor's response is often a complex combination of posttraumatic features and guilt-laden grief. Both aspects must be worked through during the process of recovery.

Through the middle four chapters, Farr examines how the rest of society

copes with the reality of suicide. She describes our current scientific knowledge about suicide with a depth of understanding and considers contemporary society's sensationalism of suicide. And she un-

covers the Internet's exploitation of suicide. In particular, Farr highlights the cultural overkill of the theme of suicide that numbs our sensitivity to this tragedy. She notes how many recent movies use suicide as a plot device much as they would a car chase or an exploding building. Farr concludes, "This multiple-personality Media can be a breezy, entertaining buddy, a concerned and thorough teacher bent on enlightening and informing, a shameless manipulator, a brainless twit, an overbearing nuisance, and worse, an insensitive, torturing bully."

What role should we insist that the media play? I feel that Farr is not critical enough of her media colleagues. Writers and journalists have a profound professional responsibility to deal with suicide in ways that prevent contagion. The potential for vulnerable individuals to carry out copycat suicides in response to fictional or nonfictional accounts is well documented. Too many times in my professional role I have had to remind journalists about the existence of media guidelines for the reporting of suicide. The portrayal of suicide in the popular media has an impact on the health of the community. We as health professionals must insist on greater professionalism from the media in this regard. Journalists, just as physicians, must be aware of the side effects of their interventions.

Although Daniel Jones was a writer of some notoriety, this book is not a tell-all story of the Toronto artistic scene. It is not an academic recounting of current scientific formulations of suicide. It is not a prescription for the self-

directed recovery from grief. Rather, it is an offer of hope, a beautifully written journey of reclamation, and simply a very personal account of the author's own grief. I was very moved by After Daniel. Many

physicians have and will, in the future, encounter suicide in their professional and personal lives. Many of our patients will be survivors of suicide. I recommend we all take up and read Moira Farr's account of death, life, and humanity.

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